

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 11, 2005 8:00 am**  
**Secretary of State**

03-11-2005 90298 046 \*\*\*150.00

**DOCUMENT # P03000091435**

1. Entity Name

FLORIDA FINANCIAL INFORMATION NETWORK, INC.



Principal Place of Business

5327 COMMERCIAL WAY  
PARK PLACE - SUITE D-122  
SPRING HILL FL 34606

Mailing Address

5327 COMMERCIAL WAY  
PARK PLACE - SUITE D-122  
SPRING HILL FL 34606

2. Principal Place of Business

5327 COMMERCIAL WAY

Suite, Apt. #, etc.

PARK PLACE, SUITE D-122

City & State

SPRING HILL, FLORIDA

Zip

34606

Country

UNITED STATES

3. Mailing Address

5327 COMMERCIAL WAY

Suite, Apt. #, etc.

PARK PLACE, SUITE D-122

City & State

SPRING HILL, FLORIDA

Zip

34606

Country

UNITED STATES



1st MOORE

CR2E034 (10/04)

4. FEI Number

43-2026944

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BORNHOFF, PHILIP JR.  
5327 COMMERCIAL WAY  
PARK PLACE - SUITE D-122  
SPRING HILL FL 34606

7. Name and Address of New Registered Agent

Name

DOUGLAS BRAINARD

Street Address (P.O. Box Number is Not Acceptable)

5327 COMMERCIAL WAY, SUITE D-122

City

SPRING HILL

FL

Zip Code

34606

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2005 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete  
NAME BORNHOFF, PHILIP JR.  
STREET ADDRESS 5327 COMMERCIAL WAY #D-122  
CITY-ST-ZIP SPRING HILL FL 34606

TITLE PD ☐ Delete  
NAME BRAINARD, DOUGLAS  
STREET ADDRESS 5327 COMMERCIAL WAY, D-120  
CITY-ST-ZIP SPRING HILL FL 34606

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOUGLAS J BRAINARD

Date

2/28/05

Daytime Phone #

352-597-0520